

CLAIMS ONLY

Application Number

101789496

Filing Date

Applicant(s)

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2						
3						
4						
5						
6						
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48						
49						
50						
Total Indep	2					
Total Depend	22					
Total Claims	24					

* May be used for additional claims or amendments

	Indep	Depend	Indep	Depend	Indep	Depend
51						
52	1					
53		1				
54		1				
55		1				
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98						
99						
100						
Total Indep	1					
Total Depend	4					
Total Claims	5					

5
29